Image# 11990145258

## STATEMENT OF

FORM 1		NIZATION structions)	c	iffice use only
NAME OF COMMITTEE (in	full) (Check if na is changed)	me Example: If typying, typover the lines	12FE4M5	
ARCELORMIT	TAL USA LLC GOOD GOVE	ERNMENT COMMITTEE		
ADDRESS (number and	street) 1808 Eye Stree	t NW 5th Floor		
(Check if address				
is changed)	Washington		DC L	20006
		CITY▲	STATE▲	ZIP CODE 📥
COMMITTEE'S E-MA	L ADDRESS (Please provide only			
(Check if address is changed)	anita.pandolfe	@arcelormittal.com		
COMMITTEE'S WEB	PAGE ADDRESS (URL)			
(Check if address				
is changed)				
2. DATE M N 0 1	7	1		
3. FEC IDENTIFICA		C C00104109		
A IS THIS STATEM	IENT X NEW (N)		(A)	
4. IS THIS STATEM	IENT X NEW (N)	OR AMENDED	(A)	
I certify that I have exami	ned this Statement and to the best of	my knowledge and belief it is true, co	orrect and complete	
Type or Print Name of	Treasurer Anita JS Pa	andolfe		
Signature of Treasurer	Electronically Filed by Anit	a JS Pandolfe	Date 0 1 M	31 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
NOTE: Submission of fa	•	tion may subject the person signing the	·	s of 2 U.S.C. §437g.
Office Use Only		For further inforn Federal Election C Toll Free 800-424- Local 202-694-11	commission -9530	FEC FORM 1 (Revised 02/2009)

	F	FEC F	Form 1 (Revised 02/2009)	Page 2				
5.			OMMITTEE (Check One) Committee:					
	(a)		This committee is a principal campaign committee. (Complete the candidate information below.)					
	(b)		This committee is an authorized committee, and is NOT a principal campaign committee. (Complete tinformation below.)	he candidate				
	Name Candi							
	Candi Party	idate Affiliatio	on Office Sought: House Senate President	State District				
	(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.					
	Name Candi							
	Party	Comm						
	(d)		This committee is a (National, State (or subordinate) committee of the	(Democratic, Republican,etc.) Party.				
	Politic	cal Act	tion Committee (PAC):					
	(e) X	X	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected	d organization is a:				
			X Corporation Corporation w/o Capital Stock La	bor Organization				
			Membership Organization Trade Association Co	poperative				
			χ In addition, this committee is a Lobbyist/Registrant PAC.					
	(f)		This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated committee. (i.e., nonconnected committee)	d fund or party				
			In addition, this committee is a Lobbyist/Registrant PAC.					
			In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)					
	Joint F	Fundra	ising Representative:					
	(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.					
	(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.					
		Com	mittees Participating in Joint Fundraiser					
			1. FEC ID number					
			2. FEC ID number					
			3. FEC ID number					
			.   FEC ID number   C					

Write or Type Committee Name

Andeedimin rae ooa	LLC GOOD GOVERNMENT COMMIT		
6. Name of Any Connected Or	ganization, Affiliated Committee, Joint Fund	draising Representative, or L	eadership PAC Sponsor
ArcelorMittal USA LLC			
Mailing Address	1 South Dearborn		
	19th Floor		
	Chicago	<b></b>	60603
	CITY▲	STATE <b>▲</b>	ZIP CODE
Relationship:			
X Connected Organization	Affiliated Committee Join	nt Fundraising Representative	Leadership PAC Sponsor
7. Custodian of Records: Ide possession of Committee	entify by name, address, (phone numbe books and records.	r optional), and position	of the person in
Full Name Anita J	IS Pandolfe		
Mailing Address	1808 Eye Street NW		
	5th Floor		
	Washington	DC	
Title or Position ▼	CITY A	STATE	ZIP CODE A
Custodian	of Records	Telephone number	<u>2 – 835 – 3312</u>
	and address (phone number optional designated agent (e.g., assistant treas		mmittee; and the
Full Name of Treasurer  Thoma	as A McCue		
Mailing Address	1 South Dearborn		
	19th Floor		
	Chicago	IL	60603 –
	Cilicago		
Title or Position ♥	CITY A	STATE A	ZIP CODE A

FEC Form 1 (Revis	sed 02/2009)		Page <b>4</b>
Full Name of Designated Agent	Neil T. Messick		
Mailing Address	1808 Eye Street NW		
	5th Floor		
	Washington	DC	20006 –
Title or Position ▼	CITY A	STATE 🛦	ZIP CODE A
Assista	ant Treasurer	Telephone number 202	835 3310
JP Mailing Address	Morgan Chase Bank N.A.  1 Chase Manhattan Plaza		
Mailing Address			
	Treasury Svcs 7th FL NY1-A150		
	New York	NY L	10005
	CITY 🗻	STATE <b>△</b>	ZIP CODE 🛕
Name of Bank, Depositor	y, etc.		
Mailing Address			
	CITY 🔼	STATE <b>⊿</b>	ZIP CODE 🛕